BEST AVAILABLE COPY

								Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective January 1, 2003									691	7	72	7.6
		CLAIMS A	S FILED - (Column		-	(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS									FEE	7	RATE	FEE
FOR.			NUMBER FILED		NUMBER EXTRA		8/	BASIC FEE \$375		OR	BASIC FEE	\$750
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =					X42=		OR	X84=	
ML	JLTIPLE DEPEI	NDENT CLAIM P	RESENT					+140=			+280=	
* If	the difference	in column 1 is	less than z	an zero, enter "0" in column 2			L	OTAL		OR OR	TOTAL	
CLAIMS AS AMENDED - PART II							•	0	·] (1	OTHER	THAN
_		(Column 1)	(Column 2) (Colum			(Column 3)	SMALL ENTITY		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 24	Minus	-2	1	=	,	(\$ 9=		OR	X\$18=	Spi !
AME	Independent	NTATION OF MI	Minus	SENDENT	3		7	(42=		OR	X84=	750.0
	TIMOTPHESE	NATION OF MIC	DETIPLE DEI	PENDEN	CLAIM		T	140=		OR	+280=	
							L_	TOTAL			TOTAL ADDIT, FEE	8/000
	(Column 1) (Column 2) (Column 3)							IT. FEE			WDH. FEET	<i>a z</i>
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 0	Minus	** 2	<u> </u>		×	\$ 9=		OR	X\$18≂	
AME	Independent	NTATION OF ML	Minus	ENDENT	CLAIM	-/	×	(42=		OR	X84=	7
ليا		TOTAL OF THE	CT II' EC OCT	CHOCK	CENTRA		+	140=		OR	+280=	/
							ADD	TOTAL		OR ,	TOTAL ADDIT, FEE	
		(Column 1)		(Colum		(Column 3)						,
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL _FEE
Ž	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***		2	×	42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JUTIPLE DEF	ENDENT	CLAIM							
• 11	f the entry in colu	mn 1 is less than th	e entry in colu	mn 2, write	"O" in col	umn 3.	<u> </u>	40=		OR	+280=	
***	f the "Highest Nui If the "Highest Nui	mber Previously Pa mber Previously Pa	id For IN THI	S SPACE IS S SPACE IS	less than	20, enter "20." 3. enter "3."	ADD	TOTAL T. FEE			TOTAL ODIT. FEE	
1	The "Highest Num	ber Previously Paid	for (Total or	Independe	nt) is the	highest number	found is	the ap	propriate box	in cot	ımn 1.	

FORM PTO-875 (Rev. 1/03)

Palent and Trademark Office, U.S. DEPARTMENT OF COMMERCE